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CONFIRMATION NO. 6813

|                                                                                                                                                                                                                                                                                                         |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                    |                                                                |                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|------------------------------------|
| <b>SERIAL NUMBER</b><br>09/665,888                                                                                                                                                                                                                                                                      | <b>FILING OR 371(c)<br/>DATE</b><br>09/20/2000<br><b>RULE</b>                                                     | <b>CLASS</b><br>715               | <b>GROUP ART UNIT</b><br>2178                                                                                                                                                                                                                                                      | <b>ATTORNEY<br/>DOCKET NO.</b><br>BOBJ-180/01US<br>304661-2408 |                                    |
| <b>APPLICANTS</b><br>Chris Connaughton, West Chester, OH;<br><br><b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/154,966 09/20/1999<br><b>** FOREIGN APPLICATIONS *****</b><br><br><b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 10/27/2000</b>                        |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                    |                                                                |                                    |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged<br>Examiner's Signature _____ Initials _____ |                                                                                                                   | <b>STATE OR<br/>COUNTRY</b><br>OH | <b>SHEETS<br/>DRAWING</b><br>7                                                                                                                                                                                                                                                     | <b>TOTAL<br/>CLAIMS</b><br>22                                  | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>83282                                                                                                                                                                                                                                                                                 |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                    |                                                                |                                    |
| <b>TITLE</b><br>SYSTEM AND METHOD OF ANALYZING AN HTML DOCUMENT FOR CHANGES SUCH THAT THE<br>CHANGED AREAS CAN BE DISPLAYED WITH THE ORIGINAL FORMATTING INTACT                                                                                                                                         |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                    |                                                                |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>755                                                                                                                                                                                                                                                                   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                                                |                                    |